

NOT WANTED - ~~NON~~

(Last Name) JACOBS	Prisoner's Name (First Name) JANE	Date and Time of Arrest 4/17/68	A.M. P.M.	Criminal Record No. 709626
Aliases N/A	Middle Names N/A	Pct. of Arrest 711	Arrest No. 583	Standing Photo No.
Address (Reside City and State or Foreign Country) Hudson St		Location of Arrest 118 Clinton St		No. of Persons
Occupation WRITER	Social Security No.	Drug Used?	Kind of Drug Used	
Charge(s) (Title and Specific Offense) PL 240.05, 240.08, 145.00, 150.05				
Give verbatim statement of all essential details of the crime or offense: Caused 11 persons to follow handcuffed man, obstructed govt. property				
INFORMATION FOR USE IN MODUS OPERANDI FILE				
Date and Time of Crime 4/10/68	A.M. P.M.	ASSOCIATES ON THIS ARREST		
Crime Committed At 350 Grand St	(Define Out One) Inside Outside	Name	Criminal Record No.	
Type of Building (Vehicle, Store, Dwelling, Loft, etc.) SEWARD BACK H.S.				
Entered Via (Door, Window, Roof, etc.)				
Means of Entry (Jimmy, Key, Bodily Force)				
Object of Crime				
Represented Self As (Agent, Inspector, etc.)				
Talk Told by Prisoner to Complainant		OTHER KNOWN ASSOCIATES (State Names, Address and Criminal Record No.)		
Vehicle Used? Describe				
Facilities Committed				
Programs		IF PRISONER OWNS OR DRIVES AN AUTO, FILL IN THE FOLLOWING CAPTIONS:		
Complaint STATE N.Y.		Make	Model	Year
Address 5 TOTH, NY 5-FRANKS		Does Prisoner Own the Auto?	<input type="checkbox"/> Operator Lic. No.	<input type="checkbox"/> Owner Lic. No.